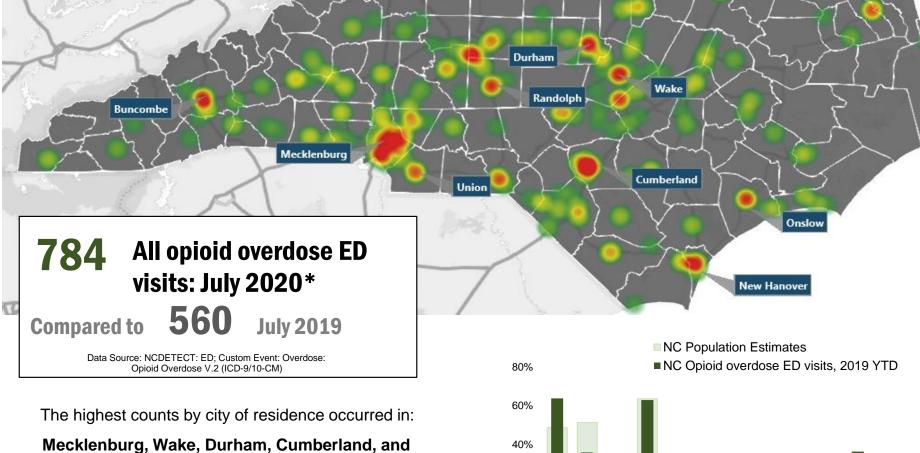
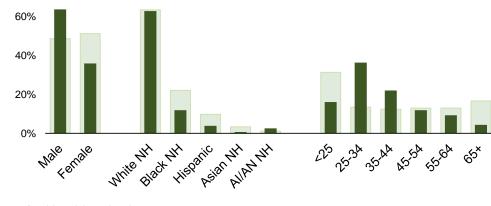
ALL OPIOID OVERDOSE ED VISITS: NORTH CAROLINA, JULY 2020*



The highest rates of visits (≥10) per 100,000 residents occurred in:

Richmond (24.5), Columbus (21.6), Robeson (20.5), Carteret (20.1), and Lee (19.5) counties.

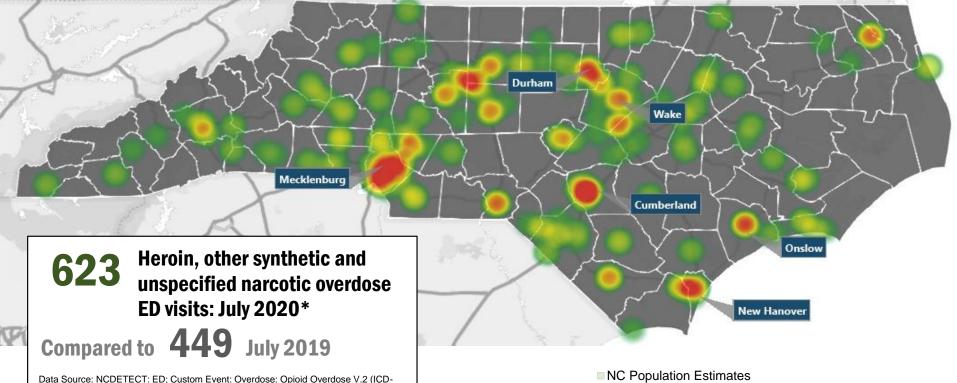


Note: NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of an opioid overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents.*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.



Buncombe counties.

HEROIN AND OTHER SYNTHETIC/ UNSPECIFIED NARCOTIC OVERDOSE ED VISITS, JULY 2020*



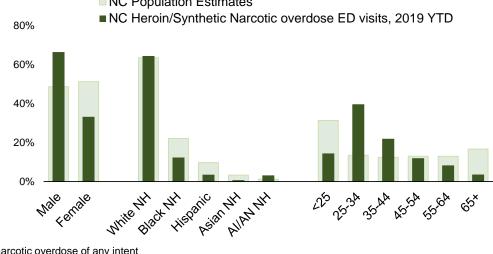
The highest counts by city of residence occurred in:

9/10-CM) searching diagnosis codes for T40.1, T40.4, & T40.6.

Mecklenburg, Wake, Durham, Cumberland, and New Hanover counties.

The highest rates of visits (≥10) per 100,000 residents occurred in:

Carteret (20.1), Columbus (18), Lee (17.9), and Robeson (15.9) counties.



Note: NH(Non Hispanic). Counts based on diagnosis (ICD-9/10-CM code) of a heroin or other synthetic narcotic overdose of any intent (accidental, intentional, assault, and undetermined) for North Carolina residents. *Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.

